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PROGRAMME DEVELOPMENT IN THE MIDDLE EAST AND NORTH AFRICA

SUMMARY

The present document reports on and analyses major new trends and developments of UNICEF programme cooperation in the Middle East and North Africa region during 1990.

The UNICEF regional office has responsibility for UNICEF cooperation in the following countries and territories: Algeria, Bahrain, Cyprus, Djibouti, Egypt, Iran (Islamic Republic of), Iraq, Jordan, Kuwait, Lebanon, Libyan Arab Jamahiriya, Morocco, Oman, Qatar, Saudi Arabia, Sudan, Syrian Arab Republic, Tunisia, Turkey, United Arab Emirates and Yemen, as well as the West Bank and Gaza.

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I. POLITICAL AND SOCIO-ECONOMIC DEVELOPMENTS AFFECTING CHILDREN

1. During the closing months of the past year, a political and military crisis, still unfolding at the time the present document was written, enveloped the Middle East and North Africa region. The invasion of Kuwait and its aftermath shocked or damaged all the region's economies, both strong and weak. Oil prices doubled, hundreds of thousands of foreign workers returned home and both interregional trade and workers' remittances vanished overnight. The events of August to December 1990 overshadowed even the impending famine in the Sudan and a military confrontation in Lebanon. Needless to say, the upward momentum of programmes to protect children and mothers was seriously affected.

2. By mid-1990, the Middle East and North African countries were well on their way to achieving the 1990 goal of reducing the infant mortality rate (IMR) to one half its 1980 level. Moreover, all but three countries seemed ready in the new decade to move beyond child survival activities to those involving child development and protection as well. However, the situation between Iraq and Kuwait and its sequelae abruptly clouded this outlook. In the countries seriously affected early in the crisis - especially, but not only, Djibouti, Jordan and Yemen - the only clear signal in the rapidly deteriorating situation was that the recently created fragile protection for children was in danger of disintegrating. Now across the region, except in oil-producing countries, it seems probable that many middle-income families will be impoverished and the poor will face further desperation. Even massive infusions of cash would probably not prevent an increase in the number of countries in the region with low or lower-middle per capita gross national products (GNP) in the next year or two. The present group in that category, Djibouti, Egypt, Morocco, the Sudan and Yemen could grow to include Jordan, the Syrian Arab Republic and Tunisia, raising to nearly 60 per cent from the current 40 per cent the proportion of countries with annual per capita incomes under $900.

3. It seems clear that the Middle East and North African region will be a tense and poorer one in the new decade, its countries hard put to retain past levels of child protection, let alone meet the ambitious goals set at the World Summit for Children. The hope is that the momentum of progress achieved before the crisis may help to carry some, if not all, countries forward.

II. HIGHLIGHTS OF PROGRAMME, REGIONAL COOPERATION AND MANAGEMENT ISSUES

A. Universal child immunization by 1990

4. During the past year, all countries in the region positioned themselves to reach the goal of 80 per cent coverage by December 1990. In the past 12 months, the Sudan and Yemen have raised their immunization coverage dramatically - the Sudan benefiting from the personal involvement of the President and Yemen from unification. War-torn Lebanon carried out its first nation-wide coverage survey, yielding the first basic indicators on child

survival since the 1960s and the first firm evidence that all regions of the country but one are well over the universal child immunization (UCI) goal of 80 per cent. Special targeting action is under way to extend this achievement nation-wide for all six antigens of combined diphtherial/pertussis/tetanus, measles, polio and anti-tuberculosis vaccines. Coverage in the large countries - Egypt, the Islamic Republic of Iran and Turkey - has stabilized between 80 and 88 per cent, and in others it approaches 90 per cent. The momentum of routine high immunization coverage can also help to strengthen services in maternal and child health (MCH), the control of diarrhoeal diseases (CDD) and other areas likely to be affected by budget cuts.

B. Mortality reduction

5. Infant and child mortality reduction is a high political priority in Middle East and North African countries, as shown in the IMR survey results in October 1990 for the Syrian Arab Republic. Using the indirect estimate method, IMR was 44 per 1,000 live births and the under-five mortality rate (U5MR) was 56 per 1,000 live births. Political concern about protecting national mortality reduction achievements can provide vital leverage for general child health advocacy in the difficult coming months and years.

C. Safe motherhood

6. Reducing maternal mortality is also a high priority in the region for the 1990s. At a September 1990 meeting at Damascus Arab Health Ministers stated that mothers, managing successfully to bring their children through the dangers of early childhood, must have their own health and survival ensured. To monitor the goal of halving maternal mortality by the year 2000, countries in the region began to collect baseline data for 1990 this year, including the "sisterhood question", a key element in the collection of maternal mortality data, in their coverage surveys. The high levels of maternal mortality in Djibouti, Iraq, the Syrian Arab Republic and Yemen clearly indicate the need for interventions to improve maternal health and nutrition. Moreover, the figures can also be an effective advocacy tool. By the end of 1991, all Middle East and North African countries are expected to complete the data collection and advocacy process. New programming initiatives are already under way, particularly in Djibouti, which has the region's most acute maternal mortality risks with rates as high as 750 per 100,000. New evidence in 1990 shows that fertility is declining in countries such as Tunisia and Turkey. Most countries have already begun advocating birth-spacing, and the Islamic Republic of Iran has moved to scale in its promotion of safe, effective contraceptives.

D. Action-oriented school health

7. This promising joint UNICEF/United Nations Educational, Scientific and Cultural Organization (UNESCO)/World Health Organization (WHO) programme, one of the Arab region's presentations at the World Conference on Education for All at Jomtien, Thailand, made progress in 1990, especially in Bahrain and Jordan. The programme should have natural synergism with education-for-all programmes, and can help to reinforce budget-weakened primary health care (PHC) activities by shifting health education and local mobilization responsibilities to primary school teachers.

E. World Summit for Children

8. The Summit and the events that led up to it in the region - national symposia, children's congresses, an Arab mini-summit and intensive media activities - made an important impact on public awareness. Energetic post-Summit efforts to enlist signatories for the Declaration and push towards a set of readily reachable goals and targets can be a means of moving countries past the shock of the crisis between Iraq and Kuwait.

9. These strong foundation pieces - UCI and IMR successes, education initiatives and the Summit - were the region's sustaining bright spots in 1990. UNICEF country offices must build on them to preserve momentum despite the effects of the crisis.

F. The girl child

10. As a priority for the 1990s, Middle East and North African country programmes have developed or plan to develop strategies and activities to narrow disparities between boys and girls. The Arab Council for Childhood and Development has been a partner in this process, as has the League of Arab States (LAS). A sign of their advocacy success has been the decision taken by Bahrain, Kuwait, Oman, Qatar, Saudi Arabia and the United Arab Emirates to undertake situation analyses of disparities between boys and girls so that national strategies to reduce differences can be formulated. The Middle East and North African Regional Office has prepared a database on sex differentials in child survival and development (CSD) indicators and each office has undertaken similar country-level analyses. The regional consensus is that reducing educational disparities between boys and girls will help to correct, over the long term, disparities in other CSD indicators.

G. Emergencies

11. In response to the emergency created by the situation between Iraq and Kuwait, relief activities were undertaken in three broad phases. UNICEF assistance during the first phase, between August and December 1990, was closely coordinated with the Government of Jordan, United Nations agencies and non-governmental organizations (NGOs) to help to provide tents, blankets, mattresses, water supply and sanitation facilities and health supplies at six camps for refugees and evacuees entering Jordan from Iraq and Kuwait. Approximately 1.3 million refugees entered the country, severely straining the economy of Jordan, already adversely affected by the economic consequences of the situation in the region. The country expended $55 million of its own resources for emergency assistance to the refugees, only a small proportion of which has been reimbursed by the international community. In mid-December, UNICEF also arranged delivery of a shipment of paediatric medical supplies valued at approximately $318,000, excluding vaccines, weighing scales and birthing kits, to Iraq.

12. The outbreak of hostilities in mid-January 1991 generated the second phase of relief operations. Massive numbers of additional refugees from Iraq were expected to flee into the Islamic Republic of Iran, Jordan, the Syrian Arab Republic and Turkey, and the United Nations, under the leadership of the Office of the United Nations Disaster Relief Coordinator (UNDRO), prepared a regional humanitarian plan of action establishing refugee camps in the four countries. Within the plan, UNICEF was given responsibility for water supply and sanitation and was allocated $3.5 million by UNDRO. UNICEF released $2.4 million from its emergency funds, primarily for health and shelter supplies. Fully operational camps were created in all four countries. However, because the number of refugees - estimated at 40,000 - was far lower than originally expected, requests were made to divert funds to relief operations inside Iraq.

13. The third phase of assistance, from mid-February to mid-March 1991, involved efforts to ascertain and address the pressing health needs the conflict had created among children and women in Iraq and Kuwait. WHO and UNICEF organized a special mission to Baghdad in mid-February. Its disturbing findings included the fact that drugs and vaccines were in critically short supply, with the paediatric medical supplies delivered by UNICEF in mid-December being the only medicines and vaccines in evidence. The seven-member mission delivered 54 tons of urgently needed medical supplies to health authorities in Baghdad for distribution in all areas under their control and in its report recommended that further emergency relief shipments of essential humanitarian health supplies be organized to meet the needs of the population. The mission also identified the lack of safe drinking water as a critical problem in Baghdad, where 95 per cent of the population had to depend on the Tigris River for all water needs. Sewage treatment systems had been destroyed and, because of power and fuel shortages, it had become impossible for people to boil water, exacerbating the risk of epidemics from water-borne diseases. A shortage of food for infants and young children was also noted. A mission from New York headquarters and the Gulf Area Office in

Riyadh, Saudi Arabia, also met with Kuwaiti officials in Saudi Arabia and, within days of the cessation of hostilities, visited Kuwait to ascertain the priority needs of women and children in the country. One of the priorities identified was the need to address the psychological effects of the war on children.

14. A separate conference room paper will be available providing an update on the situation and describing in much greater detail all aspects of the crisis in the region.

H. Children in especially difficult circumstances

15. Children in the Sudan, Lebanon and the occupied territories of the West Bank and Gaza are the region's persisting concern, as emergency operations to assist them have settled into appalling routines and the enormous miseries inflicted on children no longer even seem to shock. International action has diminished as conditions have worsened. In the Sudan, UNICEF remains one of the few agencies on the ground. The UNICEF representative and national staff in Beirut have maintained a lonely, dangerous vigil and in 1990 won the first UNICEF Staff Award for meritorious service.

I. Monitoring and evaluation

16. The Middle East and North African region has made hard information its stock-in-trade, turning monitoring and evaluation results into a rich assortment of advocacy materials presented in many forms. Whole programmes and government policy, usually at the national level, are the focus, not individual projects. Every country in the region now has current child mortality estimates, and 1990 saw a second generation of rapid child mortality surveys. The clear, step-by-step instructions contained in the new Middle East and North African Regional Office handbook, Child mortality: a guide for simple surveys could be useful to country offices worldwide.

J. UNICEF participation in United Nations operational activities

17. The impetus to inter-agency cooperation witnessed in 1989 was maintained in 1990. WHO and UNICEF have worked closely together throughout the region, not only towards UCI, but also in field-based cooperation within the action-oriented school health programme. The success of the education-for-all initiative demonstrated to the public effective collaboration among four United Nations agencies and the global results achieved. UNICEF has also played a significant role in the joint national and international relief effort to assist evacuees from countries in the region in transit through Jordan. At the time the present report was written, the initial wave of the displaced, numbering some 800,000, had moved through Jordan in well organized stages. UNICEF has now started to prepare the camps for a further anticipated exodus and harsh weather conditions. The crisis has also precipitated the

revamping of inter-agency security committees in countries throughout the region, and UNICEF is actively participating in country-level updating and activation of United Nations security plans.

K. Future outlook

18. The economies of the region, dependent on inexpensive oil, interregional trade and migrant labourers and their remittances, have collapsed. Jordan and the Syrian Arab Republic, for example, face dramatic declines in their per capita income profiles, while the sudden forced return from Saudi Arabia of some 1 million Yemenis to their homeland threatens the newly unified country's fragile political and economic stability. A rapid review and realignment of national fiscal policies is required to ensure the protection of the most vulnerable groups and to safeguard gains made in both preventive health and basic education in recent years.

III. COOPERATION WITH REGIONAL PARTNERS

19. In July 1990, pride in CSD achievements, and unity of purpose among Arab leaders headed for the Summit, promised a further strengthening in the 1990s of the regional alliances that had built such an extraordinary record in saving children's lives over the past decade. UNICEF has woven close partnerships with all regional partners. Under the guidance of LAS, shared policies and target-setting for children entered the standard roster of ordinary meetings, such as those of the Arab Health Ministers, as well as those of extraordinary gatherings, such as the mini-summit held at Tunis during July 1990, in collaboration with the League and the Arab Council for Childhood and Development.

20. Subregional groupings further strengthened this process of cooperation. The oldest of these was the Gulf Cooperation Council (GCC). The Arab Cooperation Council, comprised of Egypt, Iraq, Jordan and Yemen has recently begun to address the same concerns. In North Africa, the Maghreb Union countries of Algeria, the Libyan Arab Jamahiriya, Mauritania, Morocco and Tunisia made UCI the unifying core of their shared programmes.

21. Today, however, those subregional alliances are in disarray. GCC faces problems, with its leading member, Kuwait having been operating from a tenuous position in exile in Saudi Arabia. The Arab Cooperation Council has disappeared altogether. Only the Maghreb Union continues to bind member countries in concerted actions to accelerate the expanded programme on immunization (EPI) by the end of 1991.

IV. OFFICE MANAGEMENT

22. The Middle East and North African region continued to maintain a presence in 17 country and suboffices over the course of 1990. However, as the year draws to a close the Aden office, formerly the country office of Democratic Yemen, will close and the office in Sana'a will administer what previously were two country programmes (see paras. 24-27 below).

23. Country programme ceilings for general resources were low in 1990, with 74 per cent of country programmes having ceilings of $500,000 or less. Creative use of resources, therefore, included the exchange of technical expertise among offices with all levels of staff involved. However, from 1991, the ceiling for general resources will be raised to $750,000. A survey on computerization in Middle East and North African field offices showed that virtually all the offices in the region have invested substantially in upgrading their information management and retrieval systems. The Sana'a office, in particular, has made outstanding progress in software development and staff training for the purposes of both advocacy and office management.

V. YEMEN

24. Special note is made here of the merging, on 22 May 1990, of Yemen with the Democratic Yemen to form a single nation, the Republic of Yemen, known as Yemen. With a population of almost 12 million, the country is the most populous in the Arabian Peninsula and faces major challenges in social and economic development. IMR at 119 per 1,000 live births and U5MR at 195 per 1,000 live births are the highest in the Middle East and among the highest in the world. Approximately 90 per cent of women are illiterate and girls make up barely 20 per cent of the primary school population.

25. Yemen has been one of the countries most affected by the situation between Iraq and Kuwait. The loss of revenue derived from oil refineries and the return of over 1 million Yemenis from bordering States has increased the number of unemployed, deprived families of their only source of income and added to the economic burden of the new State. These issues have compounded existing difficulties, including food shortages and spiralling prices.

26. The UNICEF programme of cooperation will continue to build on past experience and successes, the most remarkable of which was the achievement of UCI by 1990. Given the present situation, UNICEF assistance will centre on child survival, while analysing and developing goals and strategies for child development and protection in the context of recent developments.

27. The programme of cooperation for the country as a whole now incorporates the two ongoing country programmes, for Yemen (1987-1991) approved by the Executive Board in 1987 (E/ICEF/1987/P/L.27), and for Democratic Yemen (1991-1995) approved in 1990 (E/ICEF/1991/P/L.20). General resources approved by the Executive Board for these two programmes are sufficient to implement a revised and unified programme for Yemen until 1992. The UNICEF country

office, in close cooperation with the Government, will prepare a new programme of cooperation for the period 1993 to 1997 and submit it for approval to the Executive Board at its 1993 session.

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EMERGENCY OPERATIONS IN 1990

SUMMARY

The present report focuses on the role, operational modalities and collaborative arrangements of UNICEF with United Nations system entities and other concerned organizations in responding to the urgent needs of children and mothers caught in emergency situations. It also summarizes specific UNICEF contributions to such situations during 1990. A total of $35.9 million was mobilized and/or allocated in 1990 for UNICEF emergency response activities. These allocations are detailed in annexes I and II to the present report.

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INTRODUCTION

1. At its 1990 regular session, the Executive Board, in its resolution 1990/22 (E/ICEF/1990/13), requested the Executive Director to include coverage of the following topics in his 1991 annual report on UNICEF emergency operations:

(a) Guidelines on UNICEF involvement, including preparedness plans, authorization modalities, the definition of specific tasks, follow-up mechanisms and evaluation requirements;

(b) An outline of the administrative framework for coordination and cooperation between UNICEF and United Nations agencies, non-governmental organizations (NGOs) and other agencies operational in this field.

2. Given the increasing incidence of severe emergency situations affecting ever-growing numbers of children and mothers, the Executive Director, in 1990, decided to appoint a Director for Emergency Programmes primarily (a) to rationalize, streamline and improve UNICEF response capabilities to the needs of women and children caught in emergency situations; and (b) to enhance UNICEF support of overall United Nations efforts aimed at facilitating the provision of humanitarian assistance to all civilians caught in such situations.

3. The convergence between Executive Board recommendations and the steps taken by the Executive Director are reflected in the structure and content of the present report.

I. BACKGROUND

4. The responsibility of UNICEF to assist children in all situations of difficult circumstances is at the core of its mandate. The UNICEF response assumes a different character depending on the specific situations it addresses. It can range from activities aimed at establishing critical household food security levels in near famine drought areas to the airlifting of vaccines, supplementary food and/or oral rehydration salts (ORS) to save the lives of children and mothers caught in many types of life-threatening situations. At the present time, however, the circumstances that trigger the organization's emergency response are still defined as a situation of hardship and human suffering arising from events that cause physical loss or damage, social and/or economic disruption, with which the country or community concerned is unable to cope alone. Hence, the concept of a destructive natural or man-made event - or sets of events - causing severe hardship or human suffering to communities unable to handle their impact remains the main determinant of UNICEF emergency interventions.

5. The difficult political and socio-economic conditions in several parts of the world today make it likely that man-made, complex emergency situations -

similar to those currently affecting Afghanistan, Angola, Ethiopia, Lebanon, Liberia, Mozambique, Somalia, Sri Lanka, the Sudan and the Persian Gulf region - will continue to prevail during the 1990s.

6. Additionally, the planet appears to have entered a period of recurrent and progressively more severe natural catastrophes linked to increasing pollution, population explosion, related over-exploitation and/or destruction of weak ecosystems and climatic changes, etc., which are adding to the hardships of people caught in complex, man-made emergencies or creating new large-scale pockets of human misery.

7. Those two sets of factors have combined to cause ever greater movements of populations inside or outside national boundaries, swelling the ranks of international refugees and internally displaced people. The latter, found in ever-increasing numbers, are generally destitute and politically powerless, and comprised primarily of women and children. Moreover, the countries most affected by the above trends tend to be the poorest, least developed of the world, hence, among those most unable to cope with the resulting problems.

8. The response of the international donor community to the massive humanitarian needs arising from the above situations has been generous. Donor contributions, in cash or kind, have been implemented through a variety of channels, including support to the activities of the United Nations system entities concerned with emergencies.

9. In all of those situations, UNICEF, because of its special humanitarian responsibilities and operational capabilities, has played an important and often lead role within the organizational structure of the United Nations system which normally vests overall leadership for such operations in the hands of the United Nations Development Programme (UNDP) resident representative/United Nations resident coordinator.

10. The manner in which UNICEF assistance can be optimized through an effective coordination of its contributions with those of other United Nations system entities concerned (such as the World Food Programme (WFP), UNDP, the Office of the United Nations Disaster Relief Coordinator (UNDRO), the Office of the United Nations High Commissioner for Refugees (UNHCR) and the World Health Organization (WHO)), as well as NGOs and bilateral aid programmes, has already been demonstrated. This was especially evident, inter alia, in UNICEF participation in the United Nations response to the catastrophic 1983-1986 African drought and the establishment of the Office for Emergency Operations in Africa (OEOA). The UNICEF Executive Director played a key role in both processes.

11. More recently, the achievements of Operation Lifeline Sudan (OLS), which included many of the coordination mechanisms developed through OEOA, further illustrated the leading role which the United Nations system can play in such situations. The fact that OLS was, at its inception, led by the Executive Director of UNICEF, who made full use of UNICEF operational flexibility and capacity to act on urgent requirements and to raise resources on an ad hoc basis, has been singled out as a crucial ingredient of the success of OLS.

12. In the immediate future, there clearly exist a number of situations where the demonstrated emergency response capabilities of UNICEF will be sought or continued to be called upon in a major fashion by affected Governments. Moreover, many representatives of donor and NGO communities have made it clear that they expect UNICEF to continue to be at the forefront of the action whenever such crises develop.

13. As a result of the above, it has been deemed necessary to adjust the organization's current emergency response structure in order to provide the additional capabilities required to handle emergencies more effectively and rapidly. This has been done bearing in mind resource constraints and the fact that emergency response capabilities need to remain lean, flexible and able to adapt quickly to an ever-changing case-load.

II. UPDATING UNICEF EMERGENCY RESPONSE CAPABILITIES

A. Responsibility of the Director for Emergency Programmes

14. As a response to the changing needs or urgent nature and growing magnitude, the Executive Director decided in 1990 to appoint a new Director for Emergency Programmes, who works closely with the Programme Division and other concerned headquarters' divisions. The main responsibilities are:

(a) To rationalize and systematize the UNICEF response to the increasingly complex global situation described above;

(b) To ensure that activities funded through emergency operations are effectively, and as early as possible, linked to related rehabilitation and development activities undertaken within UNICEF country programmes;

(c) To carry out the necessary forward planning related to the above, with particular attention to emergency preparedness activities and their linkage to the relevant objectives of the International Decade for Natural Disasters Reduction;

(d) To maintain effective liaison with other United Nations organizations and the Office of the Secretary-General;

(e) To maintain direct liaison and improve cooperation with the specialized units set up by donor Governments, intergovernmental organizations and NGOs to respond to emergency situations.

15. Within the context of assisting all civilians in need and building on the principles established through OLS (as discussed in the 1990 emergency report (E/ICEF/1990/11)), negotiations during the latter part of 1990 between the United Nations, Angola and the União Nacional para a Independência Total de Angola (UNITA) have resulted in their further elaboration. UNICEF played a direct part in the definition, elaboration and endorsement of those principles by the parties concerned. These principles, which will guide United Nations responses to complex emergency situations, are summarized as follows:

(a) Humanitarian assistance must at all times be neutral;

(b) Such assistance must be made available to all civilian populations in need, wherever they are located, without discrimination;

(c) Emergency relief programmes must be based on detailed assessments of needs carried out by, or in cooperation with, the United Nations;

(d) All possible routes for the movement of emergency assistance into areas that are inaccessible owing to conflict situations must be explored. This entails contacts, of a purely operational nature, with those directly concerned in order to facilitate the safe passage of relief personnel and humanitarian supplies;

(e) Since women, children and the elderly always become the primary victims of complex emergency situations, their special needs must be given particular attention;

(f) All international organizations and NGOs participating in United Nations emergency operations must agree that they will only provide transport and deliver supplies of a purely humanitarian nature.

B. Building on past experience

16. A key instrument used in reorganizing UNICEF emergency response capabilities has been the set of recommendations arrived at during the Operation Lifeline Sudan Workshop on Lessons Learned, held at Copenhagen on 14 and 15 December 1989. Their salient points are summarized below.

17. With regard to personnel requirements:

(a) UNICEF must develop a practical, long-term view of emergency management, with capacity-building as a main component;

(b) A rapid action force of professionals with expertise in specific operational areas and with emergency-related formation (e.g., programme, supply and logistics, administration, finance, personnel and media coverage) should be created;

(c) Each field office should have designated and trained focal points for emergency activities. Basic orientation and training should precede posting;

(d) Supply and finance officers should be part of all large-scale emergency operations from their very inception;

(e) On-site training in emergency operations should be made available progressively to all relevant UNICEF staff members, with priority given to those in countries prone to disaster or conflict.

18. In the management of emergency programmes:

(a) UNICEF must establish a clear distinction between emergency and routine procedures. In this context, a review of existing emergency rules and regulations should be undertaken encompassing, if appropriate, an updating and reissuance of the manual on emergencies;

(b) Management reviews of emergency operations should be instituted no later than one year after their inception and carried out regularly thereafter, as appropriate, rather than at their end;

(c) UNICEF must be vigilant to the need to determine when an emergency situation ceases to be an emergency and its response to it becomes part of a regular country programme.

19. Recommendations for information requirements include the following:

(a) In order to allow National Committees for UNICEF to respond better to government and media queries, feedback and reporting on various aspects of emergency operations must be improved. This information must be balanced and include sensitive issues, with increased emphasis placed on technical information;

(b) Systematic and frequent reporting from field and headquarters levels, including constraints faced, should be made known to donors.

20. With regard to resource mobilization:

(a) In response to the donor community's expressed concern, fund-raising activities for large-scale emergency programmes should preferably be carried out on the basis of United Nations inter-agency needs assessments, wherein traditional responsibilities of UNICEF are clearly identified. This should not, however, exclude independent appeals by UNICEF, when and if necessary;

(b) Cooperation must be strengthened between the UNICEF Programme Funding Office, Emergency Programmes, field representatives and geographical desks to improve the content and presentation of emergency appeals forwarded to the donor community.

21. Based on these recommendations, the following steps have been or are being taken within UNICEF. They involve, essentially, a redeployment of the small, core emergency staff dealing with emergencies full time; a strengthening of cooperative arrangements within UNICEF headquarters; and an updating and strengthening of UNICEF emergency training programme. These, in turn, are related to improved modalities of cooperation with United Nations agencies, NGOs and other agencies concerned with emergency response activities.

C. Specialized personnel

22. In order to respond better, on the one hand, to the growing emergency requirements arising from ongoing and new natural or man-made crises and, on the other hand, to the need to keep additional staff costs to a minimum, the existing emergency response structure of UNICEF has been adapted to reflect, with minimal disruption, the realities of the present situation. While it previously consisted of a core Emergency Operations Headquarters Unit and a smaller Geneva-based unit, a third, Nairobi-based Rapid Response Emergency Unit now reinforces them. The Director for Emergency Programmes coordinates the activities of all three units and their staff report directly to him. Within this tripartite arrangement, each unit's functions are as follows:

(a) The New York unit dealing with emergency activities has not been augmented and continues to discharge its established functions (see paras. 24 and 25 below). However, its responsibilities and work-load have been expanded considerably through the expanded scope of its work;

(b) The Geneva Emergency Unit has also been given increased and more defined responsibilities. These include:

(i) Maintaining liaison with Geneva-based United Nations agencies primarily concerned with emergencies (UNDRO, UNHCR, WHO), the International Committee of the Red Cross (ICRC), as well as NGOs and NGO groups (the International Council for Voluntary Agencies, the League of Red Cross Societies/Voluntary Agencies Steering Committee on Emergencies and the League of Red Cross and Red Crescent Societies);

(ii) Maintaining liaison with Geneva-based United Nations missions;

(iii) Assisting the Programme Funding Office in the context of its European-based resource mobilization activities;

(iv) Providing back-up assistance to field representatives in the elaboration of emergency response programmes, as was done in the case of Liberia;

(c) The Nairobi Rapid Response Emergency Unit's key staff of four are already in place as part of the ongoing UNICEF response to OLS. Being versed in different aspects of emergency programme planning and management, they are "drafted" on an ad hoc basis into the rapid response concept when developments in the world call for a quick situation analysis, programme definition response or specialized, technical input. This work, however, is not carried out at the expense of their operational responsibility to OLS.

23. Members of this unit are sent out at the request of field representatives, and missions of this type have already been undertaken in Somalia, Ethiopia, Djibouti and Angola. Their services, however, are not a priori limited to Africa. It is clear that new requirements may arise in

Latin America and the Middle East for a variety of reasons and they will be responded to as appropriate.

24. It should be emphasized that by utilizing the OLS Nairobi Emergency Response Unit and the existing New York and Geneva emergency structures, the strengthening of UNICEF emergency response capacity has been carried out with a minimum of personnel disruption or additional costs.

In-house coordination

25. As part of the sharpening of the UNICEF in-house emergency response capacity, steps have been taken to enhance cooperation between the New York Emergency Operations Unit and the Programme Division geographical desks, the Programme Funding Office on resource mobilization, as well as the Divisions of Information, Personnel and Supply. This closer pattern of interaction aims at (a) avoiding duplication and the setting up parallel structures; (b) bringing about a better understanding of the fundamental causes of complex emergency situations, their internal dynamics and the resulting changes in emergency/rehabilitation requirements that stem from their evolution; and (c) fostering the development of emergency response programmes that are closely linked to rehabilitation activities that can be implemented in parallel with them - or that invariably follow in their wake - and that should be incorporated into the country programme process as soon as possible.

Training

26. In response to the recommendations of the Copenhagen workshop (see para. 16 above), steps have been taken to develop and implement an upgraded training programme tailored to current needs. As explained previously, the broad aim of the programme is to strengthen, in UNICEF field offices, the expertise and capabilities required to deal with emergencies when and where they occur with minimal delay, staff disruption and reduced dependency on usually difficult to mobilize outside expertise.

27. In order to ensure that the training programme stays on track and is attuned to similar activities being undertaken by other relevant United Nations agencies (UNDP, UNDRO, UNHCR, WFP), cooperation between UNICEF and the training sections of these organizations has been reactivated or strengthened. Additionally, in early 1991, a week-long seminar involving all concerned UNICEF staff will be carried out to revise the UNICEF emergency curriculum and to define its training activities and objectives for the 1991-1992 period.

III. COORDINATION WITH CONCERNED UNITED NATIONS AGENCIES, NON-GOVERNMENTAL ORGANIZATIONS AND OTHER BILATERAL AND MULTILATERAL ORGANIZATIONS

A. Overall United Nations framework

28. In responding to needs arising from emergency situations, UNICEF collaboration with sister United Nations agencies that are also called upon to assist Governments in coping with such situations follows the overall collaborative structure established by the Secretary-General. This arrangement reaffirms the leadership role and responsibilities, at field level, of the United Nations resident coordinator in enhancing the collaboration of concerned United Nations system entities concerned in their support of the affected Government.

29. The role of the United Nations resident coordinator who, depending on the severity of the crisis, may also have been appointed by the Secretary-General as his special representative or special coordinator for emergency relief operations, is not primarily an operational one. Its main attributes are a responsibility to lead and coordinate the activities of a number of national, multilateral and bilateral agencies which, while they all share the same goal of assisting severely affected civilian populations, do not necessarily have coherent *modus operandi*. Specifically, the resident coordinator must:

(a) Focus on the collection and dissemination of information to donors and to the outside world on the crisis at hand, i.e., the establishment of a unified, solid data base for use by all concerned parties - Government, United Nations entities, donors, NGOs, etc.;

(b) Lead all needs assessment activities in cooperation with representatives from the Government, United Nations entities, donor and NGO communities;

(c) Lead the United Nations team in developing strategies to deal with the emergency and to cooperate with the Government, NGOs and other agencies in addressing the situation;

(d) Carry out top-level negotiations with government officials regarding policy matters affecting the emergency response;

(e) Coordinate emergency-related meetings with all parties concerned at the country level;

(f) Help to coordinate resource mobilization activities through, *inter alia*, contacts with representatives of the donor community and the preparation of integrated appeals, bearing in mind that such United Nations entities as UNICEF, UNHCR and WFP have specific mandates for the provision of assistance in certain specific fields, major donor network arrangements and a responsibility for pursuing their own resource mobilization efforts within the context of such overall appeals.

30. Within the above arrangement, it is now accepted that WFP has primary responsibility for food aid and logistics sectors requirements, while UNICEF, in cooperation with WHO, handles non-food sector assistance. This division of labour did not come about inadvertently. It coalesced at the time of OEOA when the urgency and magnitude of needs required the United Nations system to make optimal use of its existing capabilities. This arrangement has subsequently been firmed up in the emergency response structures set up to assist the Governments of Mozambique, Ethiopia, the Sudan and, more recently, Angola and Liberia, in coping with the impact of long-lasting, complex emergency situations grounded in deep-seated civil strife.

B. Needs, assessments and appeals

31. The overall United Nations system emergency response structure usually comes into play when a large-scale emergency situation develops. In the case of sectoral or smaller-scale emergencies, either individual United Nations agencies respond directly to the needs of the situation at the request of the Government concerned, or the response is coordinated by the United Nations resident coordinator as part of his normal responsibilities. In so doing, the resident coordinator is often assisted by UNDRO which, through its periodic situation reports, keeps the donor community informed of needs and developments. A yellow fever or cholera epidemic would, therefore, call forth an immediate UNICEF/WHO response; a serious food shortage in a limited section of a country will see WFP and the Food and Agriculture Organization of the United Nations (FAO) automatically providing assistance, without necessarily involving other agencies. UNDRO has particular responsibility to inform the international community of all developments and generally to help coordinate its response to emergency needs arising from the advent of sudden natural disasters.

32. When a crisis of major proportion develops, the affected Government triggers a concerted United Nations response by asking for its assistance through the United Nations coordinator, UNDRO or the Secretary-General directly. In such cases, an integrated United Nations system assessment of need is made under the joint aegis of the Government and the United Nations coordinator. The role of UNICEF therein, working in close cooperation with the technical ministries concerned, WHO, NGOs and often local donor representatives, is to orchestrate the overall assessment of non-food sector needs. It is also the responsibility of UNICEF to prepare that part of the Secretary-General's appeal that outlines the non-food sector requirements and to help mobilize the resources required to cover them.

33. While UNICEF prefers to have the emergency requirements for which it is responsible presented to the donor community as part of an overall United Nations systems needs assessment, it is sometimes called upon to prepare separate sectoral appeals for emergency or rehabilitation assistance. These may be country-specific as, for instance, in the case of the appeal it launched on behalf of the Government of the Islamic Republic of Iran to help meet the drinking water and basic health emergency rehabilitation requirements

of the two provinces that had been most seriously affected by the June 1990 earthquake. They may also be subregional, as exemplified by the call for support issued in November 1990 to help host populations in Guinea, Sierra Leone and Côte d'Ivoire to deal with the urgent requirements and additional demands that the presence of large numbers of Liberian refugees was placing on their already limited access to potable water supplies, health and educational facilities.

34. As a rule, UNICEF emergency appeals - whether limited to one sector or encompassing the totality of the emergency requirements for which UNICEF is responsible - are by their very nature oriented as much towards rehabilitation as emergency requirements. To provide or improve access to drinking water supplies for drought-induced famine victims necessarily means a refurbishing or strengthening of a country's physical infrastructure. Similarly, the training of vaccination teams, the reconstruction of bush dispensaries or other basic health infrastructures have a positive impact on the long-term recovery of the affected areas. Because of that dimension present in all UNICEF appeals addressing complex emergency situations, it has often been difficult to obtain the necessary support to carry out some of these activities as some donors, at times, have tended to view them as being more developmental in nature than related to more visible immediate emergency needs. Yet, the carrying out of these activities, in parallel with the more pressing emergency responses designed to save lives and to alleviate the terrible suffering of children and mothers caught in such situations, is absolutely critical as they represent some of the principal means available to bring these victims back on the path of recovery and self-sufficiency.

C. Cooperation with non-governmental organizations

35. In carrying out the above-mentioned activities, UNICEF works closely with NGOs on needs assessment and relies heavily on them as well for the implementation of many of the identified activities. UNICEF, however, does not seek to have all of the resources required to carry out non-food sector emergency activities channeled through its own structure. Indeed, often some of the support UNICEF mobilizes is channeled through NGOs, either directly as executing agents or indirectly as recipients of some of the medical or other inputs required to carry out approved field programmes. UNICEF also actively supports NGOs in their own attempts to obtain funding from the donor community to carry out emergency relief activities.

36. What is perceived as critical is carrying out careful, joint assessments of needs and a subsequent pooling of efforts to facilitate the implementation of the required activities. In several instances, such as in Cambodia, in the implementation of OLS and in the special emergency relief programme for Angola, NGOs have signed letters of association with UNICEF or the United Nations whereby they agree to participate as equal partners in the implementation of a complex emergency programme. Under the terms of this association, they benefit - in exchange for a formal agreement to share information, to cooperate in the field and to report regularly on those

humanitarian activities they carry out that form part of the programme in question - from United Nations backing and support in the implementation of these activities and in solving problems arising therefrom. Through this arrangement, they also gain access to the logistics, communications and life support infrastructures put into place by the United Nations and participate in regular policy and operational meetings.

D. Cooperation with the donor community

37. As already mentioned, UNICEF also maintains a close relationship, at both headquarters and field levels, with representatives of the donor community and other organizations concerned with emergency situations and their impact on children and women. Particularly at the field level, regular and frank exchanges of information and views are carried out to establish a shared, realistic appreciation of the problems at hand and of ways to solve them. Such contacts contribute to the process whereby donors assess the gravity of a situation. It naturally affects, in turn, their decisions to support UNICEF and other organizations' appeals for assistance in dealing with their impact.

38. This critical field-based process of information sharing is backed up by supporting contacts between the UNICEF staff based in New York, Geneva and Nairobi, and representatives of the donor community. These are carried out at varying levels and through different means, depending on the nature of the problem at hand. They range from special donor consultation meetings, called by the Executive Director to discuss a particularly urgent crisis and related set of requirements, to individual meetings set up to discuss the elaboration and funding of specific emergency programmes.

IV. EMERGENCY OPERATIONS IN 1990

A. Principal modalities

39. With regard to financing, UNICEF emergency assistance is procedurally provided under the following main Executive Board commitments and authorizations, most of which have been in effect for the last 11 years:

(a) Diversions. Field representatives are authorized to divert supplies already in the country and funds from existing programme commitments to meet immediate emergency needs up to a total value of $25,000 per emergency. Such diversions must be agreed upon with the Government, but do not require the prior approval of headquarters. Diversions must, however, be reported to headquarters;

(b) Reprogramming. In agreement with the Government and with headquarters' approval, existing commitments from previously planned and approved regular programme activities can be reallocated for use instead for relief and rehabilitation interventions. Substantial reprogramming would normally be appropriate if the emergency is on a national scale and makes

necessary a major adjustment in the Government's own development plans and allocations - especially if previously planned activities, within the context of the new situation, will not be implementable at least in the near future;

(c) Executive Director's Emergency Reserve Fund. Resources from the Fund are available, where necessary, to provide funds quickly from UNICEF general resources, to meet requirements in relatively minor situations or to initiate operations in larger emergencies while additional resources are being sought from special-purpose contributions. Field offices must submit specific proposals, with necessary justification, to headquarters, for review and recommendation by Emergency Programmes and the concerned geographical sections;

(d) Special-purpose contributions. The Executive Director can, without prior reference to the Executive Board, appeal for special-purpose contributions for specific emergency assistance programmes. Such contributions may be sought, directly and/or through National Committees of UNICEF, and the donor community, including NGOs;

(e) Projects for supplementary funding. For long-lasting "emergency" actions, including major rehabilitation programmes or efforts to forestall a forthcoming disaster in a slowly deteriorating situation, proposals for assistance through supplementary funding may be presented to the Executive Board for approval, for which special contributions will then be sought;

(f) Special Board allocations. For special large-scale emergencies when other funding mechanisms are insufficient to meet urgent needs and/or the situation is of major international concern, the Executive Board may approve a special commitment from general resources. This may involve the convening of a special session of the Executive Board meeting or a mail poll. This would only be called for in exceptional circumstances.

40. As a rule, cash contributions are preferred to donations-in-kind. Donations-in-kind are solicited - or appropriate unsolicited donations of goods and services may be accepted - by the Executive Director from Governments, intergovernmental organizations and NGOs, as well as from commercial firms and individuals. However, UNICEF ensures that items offered are technically acceptable, are not to be used for promotional purposes by the donor and do not represent a commitment by UNICEF to purchase additional, similar goods other than through its established procurement procedures. The donor is normally requested to cover shipping, insurance and in-country distribution costs. This requirement, together with certain technical criteria, can, owing to the urgency usually associated with emergency requirements, be waived on a case-by-case basis.

B. Emergency operations in 1990

41. In 1990, UNICEF provided emergency assistance to 29 countries in Africa, Asia, the Middle East and North Africa and the Americas and the Caribbean in response to natural disasters, epidemics and man-made crises. The

organization also supported initiatives of the Secretary-General to mobilize extra resources for victims of drought, famine and civil conflicts in the countries in the Horn of Africa; Southern Africa; Liberia and the affected neighbouring countries of Sierra Leone, Guinea and Côte d'Ivoire; Afghanistan; and the countries affected by the situation between Iraq and Kuwait - Jordan, the Syrian Arab Republic and the Islamic Republic of Iran.

42. Major appeals were issued to finance emergency interventions in Mozambique and Angola in Southern Africa; in the Sudan and Ethiopia in the Horn of Africa; for Liberia and the affected countries of Sierra Leone, Guinea and Côte d'Ivoire in West Africa; and in Jordan, the Syrian Arab Republic and the Islamic Republic of Iran, which have all been affected by the situation between Iraq and Kuwait. In each of these countries, the emergency situation was caused by armed conflict, or its aftermath. In the Horn of Africa and Angola, the civil strife was compounded by drought.

43. Further appeals were issued to support relief and rehabilitation interventions in other regions of the world. All of these interventions are summarized below.

Table 1. Contributions received towards appeals for emergency relief and rehabilitation as of 31 December 1990 a/

(In thousands of United States dollars)

Region/ country	1988-1989 b/ Appeal	Received d/	Unfunded balance	1990 c/ Appeal amount	Received	Unfunded balance
AFRICA						
Angola	3 877	2 353	1 524	22 760	779	21 981
Ethiopia	15 025	6 955	8 070	-	-	-
Mozambique	10 800	5 431	5 369	11 673	6 577	5 096
Namibia	1 680	720	2 100	399	1 701	
Subregional:						
Liberia	-	-	-	2 365	557	1 808
Sierra Leone	-	-	-	2 268	-	2 268
Guinea	-	-	-	3 368	250	3 118
Côte d'Ivoire	-	-	-	1 942	-	1 942
Subtotal	32 102	16 419	15 683	46 476	8 562	37 914
ASIA						
Afghanistan	29 045	19 071	9 974	-	-	-
Philippines	-	-	-	1 000	973	27
Subtotal	29 045	19 071	9 974	1 000	973	27
MIDDLE EAST AND NORTH AFRICA						
Iran	-	-	-	16 130	1 841	14 289
Jordan	-	-	-	5 200	3 925	1 275
Sudan (OLS)	20 500	19 203	1 297	30 941	11 499	19 442
Subtotal	20 500	19 203	1 297	52 271	17 265	35 006
TOTAL	81 647	54 693	26 954	99 747	26 800	72 947

a/ Figures are subject to final closing of accounts figures for 1990.

b/ The 1988-1989 appeals, totalling $81,647,000, received 67 per cent of the overall total funding requirement, with an unfunded balance of 33 per cent.

c/ The 1990 appeals, totalling $99,747,000, received only 27 per cent of the funds required, with a remaining unfunded balance of 73 per cent.

d/ Including 1990.

44. In 1990, a total of $35.9 million was allocated from all sources of funding for emergency operations in 29 countries (see table 2 below). In Africa, Asia and the Middle East and North Africa, 16 countries received funding support from the Emergency Reserve Fund. With the agreement of Governments, UNICEF diverted or reprogrammed funds amounting to $1.2 million from long-term programmes for emergency interventions in 15 countries in Africa and Asia. Special contributions for specific-purpose emergency programmes in 14 countries totalled $30.6 million. The details of the Emergency Reserve Fund releases are given in annex I to the present document and the diversions/reprogramming of country programme funds and special contributions made to specific emergency relief and rehabilitation operations are given in annex II.

Table 2. Funds allocated for emergencies in 1990 by geographical region a/

(In thousands of United States dollars)

Region	Funding source: Emergency Reserve Fund b/	Diversion/ reprogramming	Special contributions c/	Total
Africa	1 822 d/	797	12 698	15 317
Americas and the Caribbean	-	-	-	-
Asia	- d/	448	4 956	5 404
Middle East and North Africa	1 913 d/	-	13 040	14 953
Total	3 735 e/	1 245	30 694	35 674

a/ Figures are subject to final closing of accounts figures for 1990.

b/ The annual allocation of the Emergency Reserve Fund was $4,000,000 starting in 1989 (E/ICEF/1989/12). The amounts programmed in excess of this ceiling were financed from replenishments to early allocations (see annex I for details).

c/ Includes contributions received towards ongoing appeals for emergency relief and rehabilitation.

d/ The original total allocations were $2,102,000 for Africa ($280,000), $250,000 for Asia (fully replenished) and $3,609,266 for Middle East and North Africa ($1,700,000), which were replenished in the amounts indicated in brackets from special contributions with donors agreements.

e/ Includes $265,000 authorized for headquarters' project support to strengthen management response capacity for emergencies.

Responses to natural disasters

45. In 1990, earthquakes, cyclones, floods and drought continued to affect many countries around the world. UNICEF provided emergency relief to a number of these, usually linking the assistance with ongoing activities leading to longer-term rehabilitation. Support was provided to earthquake victims in the Philippines and the Islamic Republic of Iran, as well as those affected by severe, cyclone-caused floods in the United Republic of Tanzania and Madagascar. Interventions in the Republic of Korea and China, where typhoons and torrential rains also caused flooding, and in Western Samoa, which was hit by a cyclone, were supported through the diversion of regular programme funds. UNICEF assistance was also provided to help Governments with cholera outbreaks in Mozambique and Zambia, and with meningitis epidemics in Benin and the United Republic of Tanzania. Emergency assistance was also provided to famine victims in Rwanda resulting from a poor harvest and resultant food shortages.

Responses to man-made disasters (armed conflict situations)

46. The year 1990 also saw a persistence of man-made crises situations - as a consequence of wars, political upheavels and civil strife - requiring significant UNICEF involvement. In the Horn of Africa, it is feared that the effects of the current drought that affects all countries in the region will be as severe, if not worse, than the 1983-1986 disaster, compounding the emergency.

47. In the Sudan, the escalation of hostilities and drought pressures have led to further displacements of civilians in and out of the south. People are also beginning to move in large numbers from the drought-affected areas of Darfur, Kordofan and the Red Sea Hills in the northern and central parts of the country. In Khartoum, the displaced number approximately 1.8 million and their numbers are increasing. At the request of the Government of Sudan, and with the subsequent endorsement of the Sudan People's Liberation Movement, the Secretary-General appealed to the donor community in May 1990 for continuing support to OLS. The UNICEF non-food sector component of this appeal (water supply, formal and non-formal education, health, household food security, cattle vaccination, programme and logistical support) amounted to $30,941,000. UNICEF emergency operations continued prior to that date through financing received towards its March 1989 appeal. OLS activities are designed to meet the emergency requirements of the Khartoum displaced, as well as severely affected civilians in the transitional zone (400,000) and conflict affected areas (2 million).

48. In Ethiopia, the Government has now announced that some 840,000 metric tons of food aid will be needed to compensate for crop losses brought about by the current drought. Some 70 per cent of this amount will be required by Eritrean and Tigrayan civilians. Related non-food sector requirements have not yet been assessed. UNICEF emergency interventions in the non-food sector and supplementary feeding activities were made possible in 1990 through donor funding of its 1989 appeal ($9.05 million). UNICEF support consisted

essentially of assistance to mothers and children trapped in Asmara, as well as in the provision of supplementary food, medical supplies and water sector inputs into northern Wollo and eastern Tigray, through the local church-based NGO consortium, the Joint Relief Partnership.

49. In Somalia, the escalation of civil strife throughout the country has resulted in massive internal and external movements of people. Severe floods in the Shabelli area also prompted an immediate UNICEF response. UNICEF support, linked to the six-month United Nations Extraordinary Interim Emergency Programme, which began in February 1990, complemented the position of UNHCR and WFP food assistance to the displaced and Ethiopian refugee population in the north-west and Togdeer regions of the country.

50. The influx of some 40,000 Somali and Ethiopian refugees into Djibouti has placed increasing pressure on the already over-stretched social services of the country. It is estimated that 70 per cent of the displaced population are women and children. To enable the Government to cope with the situation, UNICEF response included assistance in the water, nutrition and health sectors, primarily within the context of its ongoing programme activities.

51. Major emergency operations in southern Africa, notably Angola, Mozambique and Namibia, continued to command UNICEF attention and assistance in 1990.

52. In Angola, a combination of war, economic stagnation, prolonged drought and the displacement of large numbers of civilians caught up in conflict and insecurity, continued to affect the country. The estimated 1.9 million civilians living in the drought and war-induced famine areas of the country's central and southern regions, require urgent humanitarian assistance. In response to a government request for United Nations intervention, the Secretary-General launched an appeal to the international community on 8 November 1990 for support to the Special Relief Programme for Angola (SRPA) covering food aid and non-food emergency requirements. SRPA had also received the acceptance of UNITA and called for the urgent delivery of assistance to all civilians in need, regardless of their location. It also embodied the endorsement by the Government and UNITA of the United Nations principles of safe passage, neutrality and impartial delivery of humanitarian assistance. The non-food aid and services component of SRPA, totalling $22.8 million, has been assigned to UNICEF, which has appealed for supplementary funds to meet these requirements.

53. A joint United Nations/Government of Mozambique assessment of the emergency situation in Mozambique led to the launch on 26 April 1990 of a fourth appeal for international humanitarian emergency assistance to cover the priority food aid and non-food relief needs of 1.55 million people (1.4 million internally displaced and 154,000 refugees returning home). The UNICEF component of the appeal amounted to $11.7 million. The number of affected people, however, has since increased dramatically as a combination of military operations and the initiation of the peace process has led to hundreds of thousands of people, previously in rebel-held areas, becoming accessible for relief assistance, as well as to an increased flow of returnees

from neighbouring countries. While the requirements of the April 1990 appeal have not been fully met, they are already very much below the minimal needs of the affected civilian population.

54. In Namibia, UNICEF support during the transition period (up to the end of March 1990) focused largely on emergency and rehabilitation measures to assist the reintegration of the returnees in their home countries. Additional emergency assistance was allocated to deal with the impact of the severe drought that affected north and central Namibia in early 1990. Of a total United Nations appeal amounting to $7.6 million for the needs of the drought-affected population, UNICEF, as an active partner of the Drought Relief Committee, sought emergency funding from donors in the amount of $2.1 million.

55. The civil war in Liberia has had a severe impact both within the country itself and in the three neighbouring countries of the Côte d'Ivoire, Guinea and Sierra Leone. Large-scale relief assistance has been required to alleviate human suffering, not only for the internally displaced in Liberia, but also for Liberian refugees and their host populations in the surrounding affected countries. UNICEF responded with allocations from the Emergency Reserve Fund to meet immediate relief needs in all four countries. It also launched a subregional appeal ($7.5 million) covering programmes of intervention in the host countries of Sierra Leone, Guinea and the Côte d'Ivoire. UNICEF also participated in a United Nations inter-agency assessment mission to Monrovia and was assigned the role of lead agency for the implementation of the non-food relief intervention. The subsequent appeal issued by the Secretary-General ($13.8 million) included a $2.4 million UNICEF component.

56. Owing to the continuing conflict in Afghanistan, there are still more than 5 million Afghan refugees in Pakistan and the Islamic Republic of Iran. Some 2 million of those who remain in Afghanistan have been driven from their homes. Crop failures in the north caused severe hunger during the 1989/90 winter months, and a joint United Nations effort was mounted to feed the vulnerable groups and provide blankets and essential drugs. UNICEF is intensifying its efforts to immunize children and women in all areas and to ensure the availability of ORS packets. Support for the training of female health workers, as well as the provision of maternal and child health services and health education activities, continued through NGOs.

57. UNICEF assistance was also provided to address the needs of the civilian victims of armed conflict in Sri Lanka, where almost 1 million people were estimated to have been displaced as a result of renewed civil strife in June 1990 in the north and east of the country.

58. In the West Bank and Gaza, the continuation of the Palestinian uprising (intifadah) and the associated injuries sustained especially by children, has called for the sustainability and expansion of physiotherapy services.

59. Since 2 August 1990, well over 700,000 third-country nationals have crossed the Iraqi border into Jordan, with some seeking temporary refuge in other neighbouring countries (the Syrian Arab Republic, Turkey, the Islamic Republic of Iran and Yemen). Almost all of these refugees have now been repatriated to their country of origin. However, the displaced continue to arrive in small, but steady, numbers. UNICEF was among the first United Nations agency to respond to the crisis and the appeal of the Government of Jordan. With the immediate release of allocations from its Emergency Reserve Fund, UNICEF flew in or procured locally medical supplies, drugs, bedding, tents and water tanks. In the meantime, and within the context of an UNDRO-led appeal to donors, UNICEF issued its own appeal of $5.2 million to cover the pressing survival requirements of transients pending their departure from Jordan. UNICEF has also provided essential drugs kits to the Government of Yemen for assistance to some 380,000 Yemeni returnees affected by the Gulf crisis. In view of the fluid situation in the Gulf, UNDRO has drawn up a regional plan of action focusing on contingencies of further movements, and UNICEF has been involved in this exercise.

Annex I

RELEASES AUTHORIZED FROM THE EXECUTIVE DIRECTOR'S EMERGENCY RESERVE FUND IN 1990 a/

(In United States dollars)

Region/country	Nature of emergency/action taken	Amount
AFRICA		
Angola	Special Relief Programme: start-up operational costs and immediate intervention requirements for shelter, survival and food security, primary health care and nutrition, logistics and project support	692 000
Côte d'Ivoire	Displaced persons from Liberia: provision of essential drugs, vaccines, soap, ORS, blankets, limited quantity of feeding utensils	80 000
Djibouti	Displaced persons: accelerate and extend ongoing programme to underserved population in expanded programme on immunization, oral rehydration therapy, water/sanitation, nutrition, project support	100 000
Guinea	Displaced persons from Liberia: provision of health kits, vaccines, cold-chain items, water supply-related material	100 000
Liberia	Armed conflict situation: medical supplies and equipment, essential drugs, cold-chain supplies, supplementary feeding, water/sanitation assistance, project support	580 000
Madagascar	Cyclone/floods: essential drugs and medical supplies, water supply material, project support	100 000
Namibia	Drought: start-up operational costs and immediate intervention requirements of drought relief programme	50 000
Sierra Leone	Displaced persons from Liberia: provision of water supply/sanitation and essential drugs intervention	80 000

Region/country	Nature of emergency/action taken	Amount
Somalia	Armed conflict situation/flood: support to the United Nations Extraordinary Interim Emergency Programme for North-West and Awdal Regions for programme interventions in health, nutrition and water/sanitation; provision of essential drugs, blankets and other relief items to flood victims in Middle Shabelle region	280 000 b/
United Republic of Tanzania	Floods: supply of medical kits	40 000
	Subtotal	2 102 000
ASIA		
Philippines	Earthquake: provision of shelter and medical supplies, water supply-related items, ORS, measles vaccine	250 000 b/
	Subtotal	250 000
MIDDLE EAST AND NORTH AFRICA		
Iran (Islamic Republic of)	Earthquake: provision of shelter material, medical kits, water supply-related items, blankets	300 000 b/
Jordan	Displaced persons resulting from the situation between Iraq and Kuwait: immediate provision of shelter, bedding and construction material plus labour; water supply/sanitation material and equipment; food/nutrition; essential drugs; project support	500 000 b/
Sudan	Conflict situation (Operation Lifeline II): start-up operational and programme costs for Khartoum- and Nairobi-based operations covering fuel, project support, immunization, essential drugs, water, food security, supplementary feeding, shelter material, primary school supplies	2 579 266 b/

Region/country	Nature of emergency/action taken	Amount
West Bank/Gaza	Conflict situation (intifadah): extension and expansion of physiotherapy project	70 000
Yemen	Gulf crisis: provision of basic drugs kits to the Ministry of Health for assistance to Yemeni returnees	160 000
	Subtotal	3 609 266
PROJECT SUPPORT	Funding support to strengthen management capacity at headquarters and in the field to respond to emergencies	265 000
	Total	6 226 266 b/

a/ The annual level of the Emergency Reserve Fund for 1990 was $4,000,000. The amounts programmed in excess of this ceiling were financed from replenishments to early allocations, as detailed below.

b/ Replenishments from special contributions amounted to $2,226,266 as agreed to by the following donors: the Governments of Australia ($125,000) for the Philippines, Finland ($391,089) for the Sudan, Italy ($125,000) for the Philippines, the Netherlands ($330,566) for the Islamic Republic of Iran and the Sudan, Sweden ($280,000) for Somalia and the United Kingdom ($372,826) for the Sudan; the National Committees of Australia ($50,000) for Jordan, Spain ($52,083) for Jordan and the United Kingdom of Great Britain and Northern Ireland ($197,938) for Jordan and the Sudan; and the United States of America ($50,000) and UNDRO ($251,764) for Jordan.

Annex II

DIVERSIONS/REPROGRAMMING OF COUNTRY PROGRAMME FUNDS AND SPECIAL CONTRIBUTIONS IN 1990 FOR EMERGENCY RELIEF AND REHABILITATION OPERATIONS a/

(In United States dollars)

Region/country	Nature of emergency/action taken	Amount
	A. DIVERSIONS/REPROGRAMMING	
AFRICA		
Benin	Meningitis outbreak: vaccines	10 000
Central African Republic	Displaced persons from the Sudan: provision of emergency health kits, vaccines, drugs and medical supplies	25 000
Ethiopia	Support to ongoing emergency programme for institutional capacity-building on emergency management	300 000
Guinea	Displaced persons from Liberia: medicines, medical supplies, ORS, vaccines	32 000
Guinea-Bissau	Displaced persons from Senegal: agricultural and fishing tools	15 000
Liberia	Conflict situation: reprogramming of available funds from regular programme for emergency intervention in the provision of essential drugs and medical supplies	180 000
Madagascar	Cyclone: provision of essential drugs	33 800
Mozambique	Support to ongoing emergency programme	100 000
Rwanda	Famine situation: medicines	31 600
Somalia	Conflict situation: support to the United Nations Extraordinary Interim Emergency Programme for emergency planning, medical supplies, ORS, vaccines	40 000
United Republic of Tanzania	Meningitis outbreak: vaccines, drugs	29 300
	Subtotal, Africa	796 700

/...

Region/country	Nature of emergency/action taken	Amount
ASIA		
China	Typhoons/floods: cash contribution to United Nations inter-agency relief assistance	25 000
Republic of Korea	Floods: blankets, kitchen utensils and other relief needs	14 000
Samoa	Cyclone: seeds	9 400
Sri Lanka	Conflict situation: essential drugs, medical supplies and equipment	400 000
	Subtotal, Asia	448 400
	Total, Diversions/reprogramming	1 245 100

B. SPECIAL CONTRIBUTIONS

AFRICA		
Angola	Ongoing emergency relief and rehabilitation programmes in health, water/sanitation, logistics, nutrition, relief and survival needs	1 257 800
Ethiopia	Ongoing emergency relief and rehabilitation programmes in health, water/sanitation, nutrition, relief and survival items	3 779 300
Guinea	Displaced persons from Liberia: water and sanitation projects	250 000
Mozambique	Ongoing emergency relief and rehabilitation programmes in rural resettlement, capacity-building, water/sanitation and health, including intervention for cholera outbreak	5 275 400
Namibia	Drought relief and child rehabilitation programmes	1 789 300

Region/country	Nature of emergency/action taken	Amount
Somalia	Ongoing emergency programme and including assistance to North-West and Awdal regions and flood emergency in Shabelle region	285 900
Zambia	Cholera outbreak: provision of hospital/clinical equipment, ORS, soap, medicines	60 000
	Subtotal, Africa	12 697 700
ASIA		
Afghanistan	Ongoing relief and rehabilitation programme and winter relief project	3 308 800
Philippines	Earthquake emergency: provision of essential drugs, medical supplies, water-related supplies, shelter material and basic food items and rehabilitation programme activities in health and water	462 100
Sri Lanka	Conflict situation: provision of essential drugs and medical supplies	1 185 000
	Subtotal, Asia	4 955 900
MIDDLE EAST AND NORTH AFRICA		
Iran (Islamic Republic of)	Earthquake relief and rehabilitation activities	1 493 500
Jordan	Displaced persons from Kuwait: provision of relief items for shelter and basic needs, food/nutrition, essential drugs and vaccines, water supply-related items, sanitation supplies, project support costs	2 320 300
Lebanon	Ongoing rehabilitation programmes in health	606 100

Region/country	Nature of emergency/action taken	Amount
Sudan	Operation Lifeline: ongoing relief and rehabilitation programme	8 620 100
	Subtotal, Middle East and North Africa	13 040 000
	Total, Special contributions	30 693 600
	Grand total	31 938 700

a/ Figures reported reflect allocation amounts only and not expenditures in 1990 and are subject to final closing of accounts figures for 1990.